

Practitioner's Docket No. 101488.0001US1

PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Paul H. DeKeyser et al.

Application No.: 10/043,804
 Filed: 01/11/2002
 For: Digital Video Recorder

Group No.: 2633
 Examiner: Daniel T. Tekle

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Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
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RESPONSE TO RESTRICTION REQUIREMENT TRANSMITTAL

- Transmitted herewith is an amendment for this application.

STATUS

- Applicant is a small entity. A statement was already filed.

EXTENSION OF TERM

- The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees. 37 C.F.R. 1.17(a)(1)-(4)) for one month:

Fee: \$60.00

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10*

(When using Express Mail, the Express Mail label number is mandatory;
 Express Mail certification is optional.)

I hereby certify that on the date shown below, this correspondence is being

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37 C.F.R. § 1.8(a)
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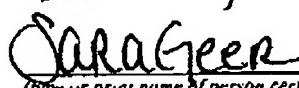
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Date: 8/14/06

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* Only the date of filing ("1.6") will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under "1.8" continues to be taken into account in determining timeliness. See "1.703(f). Consider "Express Mail Post Office to Addressee" ("1.10") or facsimile transmission ("1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

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FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY					
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE			ADDIT. FEE		
TOTAL	11 - 20 =	0 x \$ 25.00	=	\$	25.00	=	\$	0.00
INDEP.	1 - 3 =	0 x \$ 100.00	=	\$	100.00	=	\$	0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+	\$ 0.00	=	\$ 0.00	
					TOTAL ADDITIONAL FEE		\$ 0.00	

No additional fee for claims is required.

FEE PAYMENT

5. Authorization is hereby made to charge the amount of \$60.00 to Deposit Account No. 502191.

Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

A duplicate of this paper is attached.

FEE DEFICIENCY

6. If an additional extension and/or fee is required, charge Account No. 502191.

If an additional fee for claims is required, charge Account No. 502191.

Date: 8/14/06

Mei Tsang
Mei Tsang
Registration No. 56122
Rutan & Tucker, LLP
611 Anton Blvd., Suite 1400
Costa Mesa, CA 92626
USA
714-641-5100
Customer No. 34284

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